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### PHYSICIAN RECRUITMENT REPORT

## 1 May 1960 - 30 April 1961

App	lications
Α.	Total Number of Applicants
	(1) Responded to Medical Staff advertisement in the  AMA
₿.	Number rejected following review of initial letter
C.	Number followed-up on basis of original letter
D.	Number of follow-ups subsequently rejected
	This figure is based on two facts:
	<ol> <li>Applicants who did not reply to Medical Staff correspondence.</li> <li>Applicants rejected following receipt and review of application forms.</li> </ol>
E.	Number of remaining follow-ups
F.	Applicants placed in processing
G.	Applicants invited to Washington for pre-employment interviews . 16
	The results of these interviews are as follows:
	(1) Approved for employment (two candidates subsequently withdrew application)

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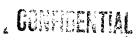
#### III. Cost of Recruitment

In order to reflect the total recruitment picture, it is necessary to include the actual amount of money expended; this expense is listed below:

- A. Total cost of the 16 pre-employment interviews. . . . \$3,058.79
- C. Total cost of advertisement placed in the <u>Journal of</u> the American Medical Association as follows:
  - (1) Medical Administrator (2 mos.)(8 issues) . . . \$ 277.20
  - (2) General Practice (3 mos.) (12 issues). . . . . \$ 260.40

### IV. Conclusion

- A. A review of the preceding statistics reveals a net result of slightly more than 1% of the 343 applicants were found qualified for employment. This percentage will no doubt increase when the processing on the remaining 61 follow-ups is completed. However, in an attempt to project to the time when this processing would be completed, it is highly doubtful that the end result for this full year of recruitment would be more than 3%.
- B. In attempting an appraisal of these statistics, and of the present Medical Staff system of recruitment, the following questions are foremost in mind:
  - (1) In view of the number of applicants processed, could the percentage of those "qualified for employment" be considered average or below average?



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(2) Are the end

Medical Staff requirements.

(3) Is there some means of eliciting possible disqualifying features of the applicant prior to pre-employment inter-

(4) Is the time spent on interviews adequate? Should it be increased or decreased?

Is there duplication by the interviewers?

(6) Without violating security, does the Medical Staff offer as much information as possible about the position?

C. In conclusion, it is suggested that those members of the Medical Staff primarily concerned with physician recruitment have the opportunity to discuss not only the above questions but all the various phases of the program.

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Personnel Officer Medical Staff